Federal Deposit Insurance Corporation

LITIGATION/PLS/ADVERSARY BUDGET

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Matter No.		Matter Caption				
Institution No.	Institution Type	Firm Name				
	☐ Bank ☐ Thrift					
PART I: LITIGATION/PLS/A	DVERSARY BUDGET INFOR	RMATION				
Attorneys' Fees		*Estimate Recovery Value \$				
Hourly Rate		*Estimate Judgement Amount \$				
Fixed Fee \$		Latinate Judgement Amount				
TOA Fee \$ Contingent Fee% of \$		*Estimated Judgement Probability \$ % *Omit for PLS matters				
Budget Phase		l	Fees	Expenses	Total	
PHASE I: Investigation						
Legal fees and expenses to be incurred from the date this matter is referred Outside Counsel prior to preparation of the initial complaint or answer.						
Estimated Hours For Completion						
Estimated Completion Date (MM/DD/YY):/_/_						
PHASE II: Initial Pleadings, Re	sponsive Pleadings, Motions, I	Discovery				
Legal fees and expenses to be incurred from preparation of the initial complaint to the discovery cut off date.						
Estimated Hours For Completion						
Estimated Completion Date (MM/DD						
PHASE III: Pretrial/Trial Prepa	ration					
Legal fees and expenses to be first day of trial.	off date until the					
Estimated Hours For Completion						
Estimated Completion Date (MM/DD/YY):/_/_						
PHASE IV: Trial						
Legal fees and expenses to be the entry of final judgment.	nmences through					
Estimated Hours For Completion						
Estimated Completion Date (MM/DD/YY)://_						

FDIC 5000/35 (11-00)

PART I: LITIGATION/PLS/ADVERSARY BUDGET INFORI	MATION (Conti	nued)				
Matter No.		Matter Caption				
Institution No.		Firm Name				
Budget Phase		Fees	Expenses	Total		
PHASE V: Post-Trial Matters/Fixed Fee and/or Fees Under \$5	,000		·			
Legal fees and expenses to be incurred after the entry of final ju excluding any appellate actions.	udgment, but					
Estimated Hours For Completion						
Estimated Completion Date (MM/DD/YY):/_/_						
Grand Total of All Litigation/PLS/Adv	versary Phases					
A Budget Worksheet must also be completed prior to budget ap (2) if directed by an FDIC Attorney.	proval (1) If the C	GRAND TOTAL	for all Phases excee	ds \$25,000, or		
PART II: LAW FIRM BUDGET ACKNOWLEDGMENT						
I acknowledge that the budget information contained herein is c Legal Division is required for any increase in the total budget a		t of my knowled	ge and written appro	val of the		
Authorized Law Firm Delegate's Signature		Date (MM/DD/YY)				
Name and Title of Authorized Law Firm Delegate (Please type of	or print)					
Telephone Number (Include area code)		FAX Number (Include area code)				
PART III: BUDGET AUTHORIZATION FOR OUTSIDE CO	UNSEL TO PRO	CEED				
FDIC Legal Division Approval						
FDIC Attorney (Recommending approval of budget)	Date Bud	ate Budget Approved (MM/DD/YY)				
Signature of Delegated Authority	Date Bud	Date Budget Approved (MM/DD/YY)				

Disclosure of Estimated Reporting Burden

Public reporting burden for this collection of information is estimated to average 0.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Assistant Executive Secretary, Office of the Executive Secretary, Room 4062, FDIC Washington, D.C. 20429; and to the Office of Management and Budget, Paperwork Reduction Project, Washington, D.C. 20503.